

Work Order ID 97914

97914

Page 1

March-01-13 1:50:25 PM

Item ID: D3203-1

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Handle

Stop

NS2

Start Date: 3/01/13

Start Qty: 12.00

12

Cust Item ID:

Required Date: 3/15/13

Req'd Qty: 12.00

12

Customer:

Reference:

Approvals: Process Plan: M65

Date: 13-03-04 Tooling:

Date:

Run Start

NR1

QC:

Date: SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
Draw Nbr	Revision Nbr								
D3203	Rev C								
100 *100* Purchasing	PURCHASING Issue P/O: 19232 Possible Supplier: Mill Supply P/N GH-180-C order (4) per KitIdentify for D3203-1Conformity certificate is required	0.00							CL 13/03/04 (12)
110 *110* Packaging	Receive & Inspect for Damage & Mat'l Certs Memo Ensure certificate of conformity is attached	0.00							JY 3/3/04 (12)
120 *120* QC Quality Control	QC6- Inspect dimensions to drawing Memo	0.00	DAS 21 98						12

DQA: _____ Date: _____

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear	General										
	Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>						
	Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>						
	Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>						
	Crushed/Crimped. <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>						
	Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>							
	Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>							
	Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>							
	Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>	<input type="checkbox"/> Other							
	Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>								
	Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>								
	Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>								

Work Order ID 97914***97914***

Page 2

March-01-13 1:50:25 PM

Item ID: D3203-1

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N900040100

Setup

Start

NS1

Revision ID:

Item Name: Handle

Stop

NS2

Start Date: 3/01/13 Start Qty: 12.00

12

Cust Item ID:

Required Date: 3/15/13 Req'd Qty: 12.00

12

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

130

130

Packaging

Packaging

Identify as per dwg & Stock Location:

0.00

(4/3/21) (12)

140

140

QC

Quality Control

QC21- Final Inspection - Work Order Release

0.00

13/3/22 JJ

MF
3-3-21

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS						
			Rework Scrap Use-as-is Work Order Update	Skid-tube Machining Thermoforming Large Fab	Crosstube Small Fab Finishing Composite	Water Jet Prod. Eng. Coor. Rec/Store/Packaging Supplier	Engineering Quality Other					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector			
Doc/Data												
Equip/Tooling												
Operator												
Material												
Setup												
Other												
Process												
Supplier												
Training												
Unapproved												
FAULT CATEGORY												
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge	<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled	<input type="checkbox"/> Other

Picklist Print

March-01-13 1:50:24 PM

Page 1

Work Order ID: 97914

Parent Item: D3203-1

Parent Item Name: Handle

Start Date: 3/01/13

Required Date: 3/15/13

Start Qty: 12.00

Required Qty: 12.00

Comments: IPP Rev:A New Issue 05-11-06 JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
GH180C Handle		Purchased	No			100	Each	0.0000	1	12			

4/3/18 (2)

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

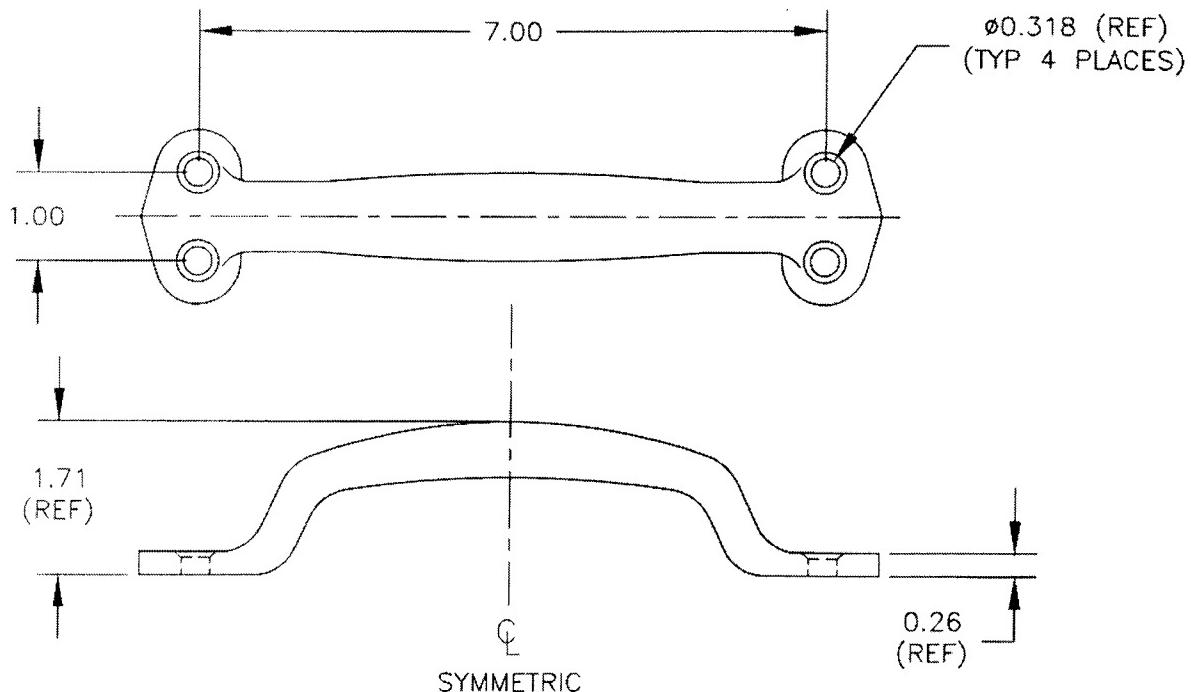
QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
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Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear	General										
	Bending <input type="checkbox"/>	Bend <input type="checkbox"/>	Grain <input type="checkbox"/>	Ovalized <input type="checkbox"/>	Pressure/Forced <input type="checkbox"/>						
	Centre Not Concentric to O/S <input type="checkbox"/>	BOM/Route <input type="checkbox"/>	Hardware <input type="checkbox"/>	Over/Under tolerance <input type="checkbox"/>	Temperature/Cure <input type="checkbox"/>						
	Cracks <input type="checkbox"/>	Broken/Damaged <input type="checkbox"/>	Inspection Incomplete <input type="checkbox"/>	Part Incorrect <input type="checkbox"/>	Weld <input type="checkbox"/>						
	Crushed/Crimped. <input type="checkbox"/>	Burrs <input type="checkbox"/>	Instructions Incomplete/Unclear <input type="checkbox"/>	Part Lost/Missing <input type="checkbox"/>	Wrong Stock Pulled <input type="checkbox"/>						
	Cuffs <input type="checkbox"/>	Contamination <input type="checkbox"/>	Maintenance <input type="checkbox"/>	Part Moved <input type="checkbox"/>							
	Heat Treat <input type="checkbox"/>	Countersink <input type="checkbox"/>	Mislabeled <input type="checkbox"/>	Positioned Wrong <input type="checkbox"/>							
	Inspection Strip in Tube <input type="checkbox"/>	Cut Too Short <input type="checkbox"/>	Misread <input type="checkbox"/>	Power Loss/Surge <input type="checkbox"/>							
	Ripples in Bend <input type="checkbox"/>	Drill Holes <input type="checkbox"/>	Offset <input type="checkbox"/>	<input type="checkbox"/> Other							
	Torque Waves in Extrusion <input type="checkbox"/>	Drawing <input type="checkbox"/>	Out of Calibration <input type="checkbox"/>								
	Turning Sequence <input type="checkbox"/>	Finish <input type="checkbox"/>	Out of Sequence <input type="checkbox"/>								
	Wave/Twist in Tube <input type="checkbox"/>	Folio <input type="checkbox"/>	Outside Dimensions <input type="checkbox"/>								



DESIGN	DRAWN BY	DART AEROSPACE LTD HAWKESBURY, ONTARIO, CANADA	
CHECKED	APPROVED	DRAWING NO.	REV. C
		D3203	SHEET 1 OF 1
DATE		TITLE	SCALE
04.11.26		HANDLE	1:2
A	03.08.27	NEW ISSUE	
B	03.10.16	REDESIGN HANDLE	
C	04.11.26	NO MACHINING	

REDESIGNED
05.01.18



D3203-1 HANDLE

- 1) PURCHASE FROM MILL SUPPLY, P/N GH-180-C OR 27-526
- 2) FINISH: NONE
- 3) ALL DIMENSIONS ARE IN INCHES
- 4) TOLERANCES ARE PER DART QSI 018 UNLESS OTHERWISE NOTED

97911MCY
13-03-04



Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID **PO19232**

Purchase Order Date 3/04/13

PO Print Date 3/04/13

Page Number 1 of 1

Order From : VU-ROY001

VISA
PAYMENT CENTRE, PO BOX 4016, STAT. A
TORONTO,

Contact Name	Buyer	Chantal Lavoie
Vendor Phone	Requisition Nbr	
Vendor Fax	Tax Resale Nbr	10127-2607
Vendor Account Nbr	Terms	COD
	Currency	USD
	FOB	Destination-Collect

Ship To : DART AEROSPACE LTD 1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

FAXED
3/03/13

Line Nbr	Reference Revision ID	Description/ Mfg ID	Req Date/ Taxable	Req Qty/ Unit of Measure	Ship Method	Unit Price	Extended Price
1	GH180C	Handle	3/08/13 Yes	12.00 Each	FedEx PI collect	\$7.8700	\$94.44

Special Inst: AS PER DWG D3203 REV. C
B97914
MILL SUPPLY: GH-180-C

PO Total: \$94.44



PO Instructions: MILL SUPPLY
VISA: 4514 0310 0909 0347 EXP: 11/13 C

VL *CL*

No substitution or deviation without
consent.
Certificate of Conformity or Material
Certification required? YES NO

Change Nbr: 1

Change Date: 3/04/13

Local (216) 518-5072
Toll-Free (800) 888-5072
FAX (216) 518-2700
Fax-Free (888) 781-2700

MILL SUPPLY, INC.

19801 MILES RD., CLEVELAND, OH 44128-4117
REMIT TO: PO BOX 28750, CLEVELAND, OH 44128-0750



www.millsupply.com

243829 INVOICE

03/05/2013

INVOICE &
SHIP DATE

CREDIT CARD

11/13 088696 A

CUSTOMER #
DARTK6A1K S-48 613-632-9577

SHIP #

PHONE

INVOICE
TO:

DART AEROSPACE LTD
1270 ABERDEEN STREET
HAWKESBURY ON K6A1K7

SHIP
TO:

ENTER DATE		ORDERED BY	P.O. NUMBER	SALESMAN	TERMS	OTHER INFO
03/05/2013			PO19232	DAVE	NET	
QTY	U/M	PART NUMBER	DESCRIPTION	PRICE	EXTENSION	
12 EA	27-526		(GH180C) GRAB HANDLE ORDER COMPLETE ***** * Look for our new 2013 Stepvan * * catalog coming soon. * *****	7.87	94.44	

*** COMING SOON. OUR 2013 STEPVAN CATALOG ***

SHIPPED VIA		PKGS	
FED PRIORITY		1	
WGHT.	CHGS.	WGHT.	CHGS.
			KNE

THANK YOU FOR YOUR ORDER

Inspect all packages for damage or
missing parts now!

We must be contacted within 3 days if
there is a problem with your order.

SEE BACK FOR DETAILS

We hereby certify that these goods were produced, or services performed
in compliance with all applicable requirements of Section 6, 7 and 12 of
the Fair Labor Standards Act, as amended, and of regulations and orders
of the United States Department of Labor issued under said Act.

PLEASE NOTE

PLEASE PAY BY THIS INVOICE
ACCORDING TO THE TERMS
ABOVE. Past due invoices
subject to 1-1/2% per month
service charge.

\$20.00 FEE

FOR RETURNED CHECKS.
RETURN POLICY ON BACK

MERCHANDISE

TAX

SUB-TOTAL

SHIPPING &
HANDLING

TOTAL

94.44

0.00

94.44

0.00

94.44

TE=9

REC'D BY